									Application or Docket Number			
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 1997									08/9	428	012	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SM/	ALL ENTITY	OR		R THAN ENTITY
FOR			NUMBER FILED			NUMBER EXTRA		RAT	E FEE		RATE	FEE
BASI	C FEE								395.0	0 OR		790.00
TOTAL CLAIMS			25	o minus	20 =	*		x\$11	=	OR	x\$22=	
	PENDENT CL		minus 3 =			= *		x41	=	OR	x82=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135	5=	OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTA	AL.	OR	TOTAL	793		
		(Colu	ımn 1)	AMENDED	(C	olumn 2)	(Column 3)	SM/	ALL ENTITY	OR		R THAN . ENTITY
AMENDMENT A		REM/ AF	AIMS AINING TER DMENT		NI PRE	GHEST UMBER EVIOUSLY AID FOR	PRESENT EXTRA	RATI	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE
	Total	* /	7	Minus	**	X) <u>=</u>	x\$11	=	OR	x \$22 =	
	Independent	* [.	1/2	Minus	***	3	=	x41:	=	OR	x82=	
/	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135	=	OR	+270=	
(Column 1) (Column 2) (Column 3)								TOT ADDIT. F		OR	TOTAL ADDIT. FEE	
AMENDMENT B		REM/ AF	AIMS AINING TER DMENT		NI PRE	GHEST UMBER EVIOUSLY AID FOR	PRESENT EXTRA	RATI	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**		=	x\$11	=	OR	x\$22=	
	Independent	*		Minus	***		=	x41:	=	OR	x82=	
【	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								j=	OR	+270=	
(Column 1) (Column 2) (Column 3)								TOT ADDIT. F		OR	TOTAL ADDIT. FEE	
ΑN		REM/ AF	AIMS AINING TER DMENT		NI PRE	GHEST UMBER EVIOUSLY AID FOR	PRESENT EXTRA	RATI	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**		=	x\$11	=	OR	x\$22=	
	Independent	*		Minus	***		=	x41:	=	OR	x82=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								j=	OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE											TOTAL ADDIT. FEE	
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE OR ATTHE "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											1	